

FROM : ARD PT HIT KUDUS INDONESIA

FAX NO. : 0291 439258

Dec. 22 2003 11:31AM P6

PTO/SB/01A (10-01)

Approved for use through 10/31/2002, OMB 0651-0072

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**DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN
APPLICATION DATA SHEET (37 CFR 1.76)**

Title of Invention SYSTEM AND METHOD FOR ANALYZING BIOFEEDBACK INFORMATION FOR PERFORMANCE OF AN INDIVIDUAL IN A GROUP

As the below named Inventor(s), I/we declare that:

This declaration is directed to:

The attached application, or
 Application No. _____ filed on _____
 as amended on _____ (if applicable);

I/we believe that I/we am/are the original and first Inventor(s) of the subject matter which is claimed and for which a patent is sought;

I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR(S)

Inventor one: Mr. J. Dwidjaja Setiabudi

Signature:

Citizen of: Indonesia

Inventor two: Mr. Adisusanto

Signature:

Citizen of: Indonesia

Inventor three: Mr. Max Arief Pramono

Signature:

Citizen of: Indonesia

Inventor four: Mr. Daimar Suryawan

Signature:

Citizen of: Indonesia

Additional inventors are being named on _____ additional form(s) attached hereto.

Burden-Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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FROM : ARD PT.HIT KUDUS INDONESIA

FAX NO. : 0291 439258

Dec. 22 2003 11:32AM P7

PTO/SB/01A (10-01)

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**DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN
APPLICATION DATA SHEET (37 CFR 1.76)**

Title of Invention	SYSTEM AND METHOD FOR ANALYZING BIOFEEDBACK INFORMATION FOR PERFORMANCE OF AN INDIVIDUAL IN A GROUP
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As the below named Inventor(s), I/we declare that:

This declaration is directed to:

The attached application; or
 Application No. _____, filed on _____
 as amended on _____ (if applicable);

I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;

I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR(S):

Inventor one:	Mr. Jojok Sadikin
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Signature:		Citizen of:	Indonesia
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Inventor two:	Mr. Min Nursandi
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Signature:		Citizen of:	Indonesia
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Inventor three:	Miss Eva Christin
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Signature:		Citizen of:	Indonesia
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Inventor four:	_____
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Signature:	_____	Citizen of:	_____
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Additional inventors are being named on _____ additional form(s) attached hereto.

Burden Hour Statement: This collection of information is required by 35 U.S.C. 113 and 37 CFR 1.63. The information is used by the public to file (and the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	n/a
Filing Date	n/a
First Named Inventor	J. Dwidjaja Seriabudi et al.
Title	SYSTEM AND METHOD FOR ANALYZING BIOFEEDBACK INFORMATION FOR PERFORMANCE OF AN INDIVIDUAL IN A GROUP
Group Art Unit	n/a
Examiner Name	n/a
Attorney Docket Number	9-16084-1US

I hereby appoint:

Practitioners at Customer Number OR
 Practitioner(s) named below:

Place Customer Number Bar Code Label here

Name	Registration Number
Paul S. Sharpe	39,493

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

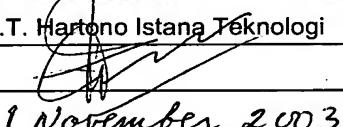
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<input checked="" type="checkbox"/> Firm or Individual Name	OGILVY RENAULT		
Address	1981 McGill College Avenue		
Address	Suite 1600		
City	Montreal	State	Quebec
Country	Canada		
Telephone	613-230-6072	Fax	613-230-6706

I am the:

Applicant/Inventor.
 Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	P.T. Hartono Istana Teknologi
Signature	
Date	1 November 2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

Total of _____ forms are submitted.

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